

**FILED**

Jan 22, 2025

CLERK, U.S. DISTRICT COURT  
EASTERN DISTRICT OF CALIFORNIAGARCIA, ARNIE JR., BF2255, A-

Inmate Prisoner Building Number

5-229 KERN VALLEY STATE PRISON,

Prison Identification

P.O. BOX 5101, DELANO, CALIFORNIA-

Prisoner Address

1A, 93216

City, State &amp; Zip Code

(Failure to notify the Court of your change of address may result in dismissal of this action.)

IN THE UNITED STATES DISTRICT COURT  
FOR THE EASTERN DISTRICT OF CALIFORNIAGARCIA, ARNIE JR.,

Prisoner Identification

Plaintiff,

v.

CASE NO. -1:25-cv-00094-HBK (PC)

(To be supplied by the Clerk)

(1) O. HERRERA, (OFFICER)

Prisoner Identification

(2) I. GALLARDO, I (OFFICER)(3) A. GARCIA, (OFFICER)(VALENCIA) (OFFICER)

Defendant(s).

CIVIL RIGHTS COMPLAINT  
BY A PRISONER☒ Original Complaint☐ First Amended Complaint☐ Second Amended Complaint☒ If you filed multiple complaints, attach page(s) listing them.

## A. JURISDICTION

1. This Court has jurisdiction over this action pursuant to:

☒ 28 U.S.C. § 1343(a); 42 U.S.C. § 1983☐ 28 U.S.C. § 1331; Bivens v. Six Unknown Federal Narcotics Agents, 403 U.S. 388 (1971).☐ Other: \_\_\_\_\_2. Institution/city where violation occurred: (KVSP) KERN VALLEY STATE PRISON

## B. DEFENDANTS

1. Name of first Defendant: O. HERRERA The first Defendant is employed as:  
OFFICER at KERN VALLEY STATE PRISON  
(Position and Title) (Institution)
2. Name of second Defendant: J. GALLARDO The second Defendant is employed as:  
OFFICER at KERN VALLEY STATE PRISON  
(Position and Title) (Institution)
3. Name of third Defendant: A. GARCIA The third Defendant is employed as:  
OFFICER at KERN VALLEY STATE PRISON  
(Position and Title) (Institution)
4. Name of fourth Defendant: VALENCIA The fourth Defendant is employed as:  
OFFICER at KERN VALLEY STATE PRISON  
(Position and Title) (Institution)

If you name more than four Defendants, answer the questions listed above for each additional Defendant on a separate page.

## C. PREVIOUS LAWSUITS

1. Have you filed any other lawsuits while you were a prisoner? ☐ Yes ☒ No
2. If yes, how many lawsuits have you filed? N/A. Describe the previous lawsuits:
- a. First prior lawsuit:
1. Parties: N/A v. N/A
  2. Court and case number: N/A
  3. Result: (Was the case dismissed? Was it appealed? Is it still pending?) N/A
- b. Second prior lawsuit:
1. Parties: N/A v. N/A
  2. Court and case number: N/A
  3. Result: (Was the case dismissed? Was it appealed? Is it still pending?) N/A
- c. Third prior lawsuit:
1. Parties: N/A v. N/A
  2. Court and case number: N/A
  3. Result: (Was the case dismissed? Was it appealed? Is it still pending?) N/A

If you filed more than three lawsuits, answer the questions listed above for each additional lawsuit on a separate page.

DEFENDANTS - CONT-

5. OLIVAS N.: THE 5TH DEFENDANT IS EMPLOYED AS:  
RN NURSE, AT KERN VALLEY STATE PRISON.
6. T. GARCIA: 6TH DEFENDANT IS EMPLOYED AS:  
LVN NURSE, AT KERN VALLEY STATE PRISON.
7. C. CHAVEZ: THE 7TH DEFENDANT IS EMPLOYED AS:  
SGT, OFFICER, AT KERN VALLEY STATE PRISON.
8. RA. FLORES: THE 8TH DEFENDANT IS EMPLOYED AS:  
LT, OFFICER AT KERN VALLEY STATE PRISON.
9. K. SANTOS: THE 9TH DEFENDANT IS EMPLOYED AS:  
WARDEN, AT KERN VALLEY STATE PRISON.
10. O. MAGALLANES: THE 11TH DEFENDANT IS EMPLOYED  
AS: (CCU), CORRECTIONAL COUNSELOR II, AT KERN VALLEY  
STATE PRISON.
11. ALL THE ABOVE DEFENDANTS ARE BEING SUED IN  
THEIR "INDIVIDUAL CAPACITY".

"PLEADING REQUIREMENTS"



TO STATE A CLAIM UNDER 42 U.S.C. § 1983 A PLAINTIFF MUST ALLEGE TWO ESSENTIAL ELEMENTS, (1), THAT A RIGHT SECURED BY THE CONSTITUTION OR LAWS OF THE U.S. WAS VIOLATED, AND (2). THAT THE ALLEGED VIOLATION WAS COMMITTED BY A PERSON ACTING UNDER THE COLOR OF STATE LAW.

THIS PLAINTIFF ALLEGES THAT ALL NAMED DEFENDANTS MENTIONED HEREIN THIS COMPLAINT, "CONSPIRED TO DEPRIVE PLAINTIFF OF HIS CONSTITUTIONAL RIGHTS TO BE SAFE, AND FREE FROM INTENTIONAL HARM, IN VIOLATION OF THE U.S. CONST. 8TH & 14TH AMENDMENTS. PLAINTIFF ALLEGES THAT ALL NAMED DEFENDANTS WERE /IS OR ARE CALIFORNIA CORRECTIONAL OFFICERS ACTING UNDER THE COLOR OF STATE LAW, WHEN THE CONSTITUTIONAL DEPRIVATIONS OCCURRED.

### "FEDERAL STANDARDS"

A COMPLAINT MUST CONTAIN A "SHORT & PLAIN STATEMENT" OF THE CLAIM SHOWING THAT THE PLEADER IS ENTITLED TO RELIEF FED. R. CIV. P. 8(a). "DETAILED FACTUAL ALLEGATIONS ARE NOT REQUIRED, BUT THREADBARE RECITALS OF THE ELEMENTS OF A CAUSE OF ACTION, SUPPORTED BY MORE CONCLUSIVE STATEMENTS DO NOT SUFFICE.

ON 3/14/20 AFTER DINNER, DEFENDANTS CAME TO PLAINTIFFS CELL, KICKED HIM UP ESCORTED ME TO REFORM AREA TOLD ME TO SHUT THE FUCK UP, SMASHED MY HEAD AGAINST THE WALL 4 TO 5 TIMES, ESCORTED ME TO THE GYM, I ASKED WHY TO THE GYM, I WAS SLAMMED ON THE GROUND AND TOLD TO SHUT THE FUCK UP, KICKED 5 TIMES IN MY UPPER BODY, AND KICKED IN MY FACE WHILE HANDCUFFED, KNEE IN MY BACK WITH FULL WEIGHT OF CIO'S BODY, PINKY FINGER TWISTED AND BROKEN PLACED IN HOLDING CELL FOR 3 HOURS IN EXCESSIVELY TIGHT HANDCUFFS WITH CELLMATE AS WITNESS IN GYM. NO IMMEDIATE MEDICAL, NO CIO INTERVENTION TO STOP THE INCIDENT, LYING MEDICAL NURSES IN COLLUSION WITH REPORTING CIO'S FORCED TO TAKE MORE PRISON TIME AS A RESULT OF CDCR EMPLOYEES COLLUSION.



## D. CAUSE OF ACTION

## CLAIM I

1. State the constitutional or other federal civil right that was violated: EXCESSIVE FORCE BY OFFICER(S)

2. Claim 1. Identify the issue involved. Check only one. State additional issues in separate claims.

- |   |   |   |                                       |
|---|---|---|---------------------------------------|
| <input type="checkbox"/> Basic necessities                        | <input type="checkbox"/> Mail             | <input type="checkbox"/> Access to the court  | <input type="checkbox"/> Medical care |
| <input type="checkbox"/> Disciplinary proceedings                 | <input type="checkbox"/> Property         | <input type="checkbox"/> Exercise of religion | <input type="checkbox"/> Retaliation  |
| <input checked="" type="checkbox"/> Excessive force by an officer | <input type="checkbox"/> Threat to safety | <input type="checkbox"/> Other: _____         |                                       |

3. Supporting Facts. State as briefly as possible the FACTS supporting Claim 1. Describe exactly what each Defendant did or did not do that violated your rights. State the facts clearly in your own words without citing legal authority or arguments. ON THE EVENING OF 3/14/20, AFTER DINNER, OFFICER HERRERA<sup>2</sup> CAME TO MY CELL AND ASKED ME TO CUFF UP. I COMPLIED WITH HIS ORDER. CIO HERRERA ESCORTED ME TO THE DOOR LEADING OUT OF THE BUILDING. AS WE WAITED IN THE ROTUNDA FOR THE DOOR TO OPEN, I ASKED CIO HERRERA WHY I WAS BEING ESCORTED OUT OF THE BUILDING. HERRERA RESPONDED BY SAYING, "SHUT THE FUCK UP" AND USED HIS HAND TO VIOLENTLY SMASH MY HEAD AGAINST THE CEMENT WALL 4 TO 5 TIMES, THEN ESCORTED ME TO THE GYM. AS WE ENTERED THE GYM I FEARFULLY ASKED CIO HERRERA, "WHY I'M BEING BROUGHT TO THE GYM AND CIO HERRERA SLAMMED DOWN ON THE CEMENT FLOOR AND SHOUTED "SHUT THE FUCK UP". I FEARFULLY COMPLAINED TO HERRERA ABOUT THE ABUSE I WAS RECEIVING, AND HERRERA KICKED ME 5 TIMES IN MY UPPER BODY. AS I LAID ON THE CEMENT FLOOR, CIO GALLARDO<sup>3</sup> KICKED MY FACE, AND I WAS HANDCUFFED, ON THE FLOOR. I START TO GET THE DIRT FROM GALLARDO BOOTS OUT MY MOUTH AND MY OWN BLOOD FROM THE KICK. GALLARDO PUT HIS FULL WEIGHT ON MY BACK WITH HIS KNEE. IN EXCRUCIATING PAIN I YELLED FOR GALLARDO TO PLEASE STOP. HE DID NOT. AND CRASHED MY PINKY FINGER, TWISTING IT UNTIL -- SEE PAGE "3A" NEXT.

4. Injury. State how you were injured by the actions or inactions of the Defendant(s).

BROKEN PINKY, HEAD TRAUMA, KICKED IN FACE, MOUTH BLEEDING, EMOTIONAL DISTRESS, PAIN & SUFFERING, DELAYED MEDICAL ATTENTION, BACK PAIN, WEIGHT LOSS, ILLEGAL CONVICTION DUE TO DEFENDANTS AND EMPLOYEES IN COLLUSION, LOSS OF PRIVILEGES,

5. Administrative Remedies:

- a. Are there any administrative remedies (grievance procedures or administrative appeals) available at your institution? ☒ Yes ☐ No
- b. Did you submit a request for administrative relief on Claim I? ☒ Yes ☐ No
- c. Did you appeal your request for relief on Claim I to the highest level? ☒ Yes ☐ No
- d. If you did not submit or appeal a request for administrative relief at any level, briefly explain why you did not. N/A



MY PINKY FINGER BROKE. WHILE IN TERRIBLE PAIN I BEGGED TO SEE THE NURSE AND DOCTOR, INSTEAD, I WAS PLACED IN THE A HOLDING CELL INSIDE THE GYM FOR 3 OR MORE HOURS, AND WITH THE HANDCUFFS EXCESSIVELY TIGHT WITH GROVES IN MY WRIST. C/O VALENCIA WAS PRESENT IN THE GYM AND WITNESSED THE BRUTALITY OF C/O GALLARDO UPON ME, YET INTENTIONALLY FAILED TO INTERVENE TO DISALLOW THE BRUTALITY AND EXCESSIVE FORCE UPON ME. I WAS INTERVIEWED BY C/O MACALANES WHO FAILED TO INTERVIEW C/O VALENCIA. I MADE THE INTERVIEWER AWARE THAT THE NURSE ON THE 72-19 FORM WAS NOT THE ORIGINAL NURSE ON THE DAY OF THE INCIDENT. I ALSO SUFFERED RIGHT KNEE BRUISES, SWELLING, PAIN, SUFFERING AND ACUTE TRAUMA AS A RESULT OF DEFENDANTS C/O HERRERA AND C/O GALLARDO'S EXCESSIVE FORCE. AT NO TIME DID DEFENDANTS HERRERA, NOR GALLARDO EXERCISE THEIR DUTIES AND RESPONSIBILITIES TO PREVENT THE ABOVE DESCRIBED INCIDENT. PLAINTIFF INFORMED MEDICAL STAFF OF THE INCIDENT & INJURIES DESCRIBED ABOVE, YET ALL THE NURSES (DEFENDANTS) WERE IN COLLUSION WITH COVERING UP FOR DEFENDANTS C/O HERRERA, GALLARDO, VALENCIA AND OFFICIALS CONDUCTING THE 602 PROCESS (DEFENDANTS) WHO WERE IN COLLUSION WITH ALL DEFENDANTS TO COVER FOR EACH AGAINST LIABILITY. PLAINTIFF FILED A 602 COMPLAINING OF THE EXCESSIVE FORCE AND ASSAULT AS STATED ABOVE. THE 602 WAS ANSWERED AT THE DIRECTOR'S LEVEL ON OCT. 18, 2021, LOG NUMBER # NKSD-D-20-01657. THE CONCLUSION AND ORDER WAS DENIED. ALTHOUGH PLAINTIFF REPEATEDLY INFORMED PRISON STAFF OF THE EXCESSIVE FORCE AND ILLTREATMENT HE SUFFERED AT THE HANDS OF DEFENDANT CORRECTIONAL OFFICERS AND DEFENDANTS HERRERA, GALLARDO AND VALENCIA, INCLUDING THE 602 AND STATEMENTS TO DEFENDANT, STATED AND OTHER PRISON OFFICIALS, ON INFORMATION AND BELIEF DEFENDANTS<sup>2</sup> FAILED TO PROPERLY INVESTIGATE AND TAKE PROPER ACTIONS TO DISCIPLINE THOSE INVOLVED. DEFENDANTS, C/O HERRERA, GALLARDO AND VALENCIA ALL KNEW OR SHOULD HAVE KNOWN THAT THEY COMMITTED EXCESSIVE FORCE AND ASSAULT AGAINST PLAINTIFF, AND THE INTENTIONAL COVER UP, DECEPTIONS, FALSE CRIMINAL CHARGES AND CONVICTION BROUGHT AGAINST PLAINTIFF DUE TO THE DEFENDANTS COLLUSION. ON INFORMATION AND BELIEF, DEFENDANTS FAILED TO PROPERLY TRAIN DEFENDANTS, C/O HERRERA, GALLARDO, AND VALENCIA TO ENSURE THAT THEY DO NOT USE EXCESSIVE FORCE AGAINST PRISONERS WHO HAVE NOT DONE ANYTHING TO PROVOKE THE USE OF FORCE. THE STATED DEFENDANTS ACTED UNDER COLOR OF STATE LAW. THE STATED DEFENDANTS C/O HERRERA, GALLARDO AND VALENCIA ALL KNEW OR SHOULD HAVE KNOWN THAT THEIR CONDUCT, ATTITUDES AND ACTIONS CREATED AN UNREASONABLE RISK OF SERIOUS HARM TO PLAINTIFF.



## CLAIM II

State the constitutional or other federal civil right that was violated: CRUEL OR UNUSUAL PUNISHMENT AS TO DELIBERATE INDIFFERENCE TO MEDICAL NEEDS

2. Claim II. Identify the issue involved. Check only one. State additional issues in separate claims.

- |  |   |   |  |
|--|---|---|--|
| <input type="checkbox"/> Basic necessities             | <input type="checkbox"/> Mail             | <input type="checkbox"/> Access to the court  | <input checked="" type="checkbox"/> Medical care |
| <input type="checkbox"/> Disciplinary proceedings      | <input type="checkbox"/> Property         | <input type="checkbox"/> Exercise of religion | <input type="checkbox"/> Retaliation             |
| <input type="checkbox"/> Excessive force by an officer | <input type="checkbox"/> Threat to safety | <input type="checkbox"/> Other: _____         |  |

3. Supporting Facts. State as briefly as possible the FACTS supporting Claim II. Describe exactly what each Defendant did or did not do that violated your rights. State the facts clearly in your own words without citing legal authority or arguments.

PLAINTIFF WAS SEEN BY RN N. OLIVAS AND T. GARCIA LVN ON 3/14/20. BOTH THESE NURSES WROTE FALSE REPORTS ABOUT PLAINTIFF'S CONDITION AND WERE IN COLLUSION WITH THE REPORTING OFFICERS OF THE INCIDENT ON 3/14/20. THE NURSES CIRCLED "NO" AS TO PLAINTIFF'S INJURIES COMMITTED BY OFFICERS STATED IN CLAIM I, IN WHICH C/O GALLARDO KICKED PLAINTIFF IN THE FACE CAUSING PLAINTIFF TO BLEED FROM THE MOUTH AND BROKE MY PINKY FINGER AND C/O HERRERA SMASHED MY HEAD AGAINST THE WALL 4 TO 5 TIMES, THEN SLAMMED MY HEAD DOWN ON AND BODY DOWN ONTO THE CEMENT FLOOR IN THE CYM. I SUFFERED THE FULL WEIGHT OF C/O GALLARDO'S KNEE IN PLAINTIFF'S BACK, CAUSING SERIOUS WHITTON PAIN AND SUFFERING AS I YELLED FOR THE C/O'S TO STOP. AS I LAY ON THE FLOOR HANDCUFFED, HUMILIATED, & TRAUMATIZED, ON 4/9/2021 PLAINTIFF WAS SEEN FOR THE INJURIES HE SUFFERED. THIS TIME, ACCORDING TO 2 "ASSESSMENT FORMS" IT'S NOTED THAT PLAINTIFF DID IN FACT SUFFERED EXCESSIVE FORCE INJURIES OF A BROKEN PINKY, HEAD INJURIES, BRUISES, AND BACK INJURY AND OR "TRAUMA". (ATTACHMENT pp. 18, 1-19). DEFENDANTS OLIVAS AND GARCIA'S REPORTS ARE STARK CONTRAST TO THE

4. Injury. State how you were injured by the actions or inactions of the Defendant(s).

DELIBERATE INDIFFERENCE TO PLAINTIFF MEDICAL NEEDS: BROKEN PINKY, BACK, HEAD INJURIES, TRAUMA & EMOTIONAL DISTRESS, SWELLING, THROBBING, PAIN, BLOOD FROM MOUTH, KNEE (RT) BRUISING, & DELAY OF MEDICAL TREATMENT FOR FINGER OF 10 DAYS & MORE

5. Administrative Remedies.

- Are there any administrative remedies (grievance procedures or administrative appeals) available at your institution? ☒ Yes ☐ No
- Did you submit a request for administrative relief on Claim II? ☒ Yes ☐ No
- Did you appeal your request for relief on Claim II to the highest level? ☒ Yes ☐ No
- If you did not submit or appeal a request for administrative relief at any level, briefly explain why you did not. N/A

2/ MEDICAL REPORTS ON THE MEDICAL ASSESSMENT FORMS, AS STATED.



## CLAIM III

1. State the constitutional or other federal civil right that was violated: DEFENDANTS K. SANTOS AND O. MAGALLANES ARE LIABLE FOR THE DUE PROCESS VIOLATIONS BY REASON OF THEIR FAILURE TO CORRECT THEM ON APPEAL

2. Claim III. Identify the issue involved. Check only one. State additional issues in separate claims.

- |  |   |  |                                       |
|--|---|--|---------------------------------------|
| <input type="checkbox"/> Basic necessities             | <input type="checkbox"/> Mail             | <input type="checkbox"/> Access to the court                             | <input type="checkbox"/> Medical care |
| <input type="checkbox"/> Disciplinary proceedings      | <input type="checkbox"/> Property         | <input type="checkbox"/> Exercise of religion                            | <input type="checkbox"/> Retaliation  |
| <input type="checkbox"/> Excessive force by an officer | <input type="checkbox"/> Threat to safety | <input checked="" type="checkbox"/> Other: <u>DUE PROCESS VIOLATIONS</u> |                                       |

3. Supporting Facts. State as briefly as possible the FACTS supporting Claim III. Describe exactly what each Defendant did or did not do that violated your rights. State the facts clearly in your own words without citing legal authority or arguments.

ALTHOUGH WARDEN K. SANTOS AND O. MAGALLANES CDT DID NOT COMMIT THE EXCESSIVE FORCE VIOLATIONS THEY BECAME LIABLE AND FOR THE NURSES FAILURE TO RESPONSIBLY REPORT THE HARM AND INJURIES OF PLAINTIFF DURING THEIR FILING OUT THE MEDICAL REPORT OF INJURY OR UNUSUAL OCCURRENCE CDCR FORM 7219 AND DEFENDANTS INVESTIGATION OF THE EXCESSIVE FORCE INCIDENT WITH THE LIABLE DEFENDANTS INCIDENT REPORTS WHICH WERE FALSE AND IN COLLUSION WITH PARTICIPATING OFFICERS, THE STATED DEFENDANTS BOTH BECAME RESPONSIBLE WHEN THEY FAILED TO CORRECT THE STATED VIOLATIONS DURING THE COURSE OF THEIR SUPERVISORY RESPONSIBILITIES AS STATED IN PLAINTIFFS 402 GRIEVANCE AND OTHER INCLUDED SUPPORTING DOCUMENTS FILED BY PLAINTIFF GARCIA, (ATTACHMENT pp. 20-28). A SUPERVISOR WHO LOOKS OF A CONSTITUTIONAL VIOLATION THROUGH A REPORT OR APPEAL MAY BE HELD LIABLE FOR FAILING TO CORRECT IT. IN PARTICULAR, WARDENS AND OTHER HIGH LEVEL PRISON OFFICIALS WHO

4. Injury. State how you were injured by the actions or inactions of the Defendant(s). SEE PAGE 8

## 5. Administrative Remedies.

- a. Are there any administrative remedies (grievance procedures or administrative appeals) available at your institution? ☒ Yes ☐ No
- b. Did you submit a request for administrative relief on Claim III? ☒ Yes ☐ No
- c. Did you appeal your request for relief on Claim III to the highest level? ☒ Yes ☐ No
- d. If you did not submit or appeal a request for administrative relief at any level, briefly explain why you did not. \_\_\_\_\_

If you set more than three Claims, answer the questions listed above for each additional Claim on a separate page.



## CONTINUATION PAGE

WARDEN DESIGNATED TO DECIDE 602 APPEALS HAVE THE DUTY TO CONDUCT AT LEAST A "MINIMAL INVESTIGATION" WHEN CONFRONTED WITH EVIDENCE OF DUE PROCESS FOR EXCESSIVE FORCE VIOLATIONS AND THE DEFENDANTS MAY BE HELD LIABLE FOR FAILING TO CORRECT THEM. IT CANNOT BE ARGUED THAT THE WARDEN AND COTI DID NOT LEARN OF THE 602'S EXCESSIVE FORCE DUE PROCESS VIOLATIONS IN THIS CASE. THE INADEQUATE STATEMENT OF REASONS, THE FAILURE TO CALL ANY OF PLAINTIFFS WITNESSES, AND THE LACK OF EVIDENCE IN THE REPORTS FOR THE CHARGE OF BATTERY ON A PEACE OFFICER, ALL APPARENT FROM THE DOCUMENTS CREATED IN THE COURSE OF THE DISCIPLINARY PROCEEDING. MOREOVER, THE PLAINTIFF IDENTIFIED THE DUE PROCESS VIOLATIONS IN HIS APPEAL LETTER SO THE WARDEN KNEW JUST WHAT TO LOOK FOR. THIS IS A CASE WHERE THE DEFENDANTS PERSONALLY HAD A JOB TO DO, AND THEY DID NOT DO IT AND THEIR FAILURE TO DO THEIR JOB WAS "SO LIKELY TO RESULT IN THE VIOLATION OF THE INMATES' CONSTITUTIONAL RIGHTS AS TO ESTABLISH DELIBERATE INDIFFERENCE ON THEIR PART. PLAINTIFF HAS A WITNESS STATEMENT, "WINGFIELD ROBERT, #BF 3785 WHO SEEN THE INCIDENT IN PART, YET WAS NOT CALLED BY THE SENIOR HEARING OFFICER NOR WARDEN, OR THE COTI. (ATTACHMENT, pg. 29). THIS WITNESS WAS RELEVANT TO THE INCIDENT AND SAW DEFENDANT HERRERA SLAMMING PLAINTIFF'S HEAD AGAINST THE WALL WHILE IN HANDCUFFS. PLAINTIFF WAS FOUND GUILTY OF BATTERY UPON A PEACE OFFICER. THE SHO SIMPLY ADOPTED THE REPORTS OF STAFF MEMBERS WITH A FALSE EXPLANATION AND DENIES DUE PROCESS. ALSO, D. MACALLANES WAS BOTH THE PERSON WHO INTERVIEWED PLAINTIFF OF THE EXCESSIVE FORCE AND 602 AND FAILED TO BE FAIR AND HONEST, AS DID THE WARDEN, DURING THE 602 DUE PROCESS. BOTH WERE IN COLLUSION WITH ALL THE CIO'S INVOLVED IN THE EXCESSIVE FORCE AND FAILURE TO INTERVIEW BY OTHER OFFICERS INVOLVED IN THE CASE. WARDEN K. SANTOS AND COTI MACALLANES WILLFULLY, INTENTIONALLY AND KNOWINGLY WERE COLLUSIVE FOR ALLOWING THE OFFICERS INVOLVED IN THE EXCESSIVE FORCE TO NOT BE HELD LIABLE FOR ANY AREA OF LIABILITY.



CONCLUSION

CRIMINATION: AS A DIRECT, PROXIMATE AND LEGAL RESULT OF THE BEFOREMENTIONED ACTS AND COMMISSIONS COMMITTED IN BAD FAITH BY DEFENDANTS, EACH ONE OF THEM, THIS PLAINTIFF HAS SUFFERED CONSTITUTIONAL DEPRIVATIONS, RESULTING IN ACTUAL INJURY PSYCHICALLY AND METALLY. THESE INJURY'S HAS NO RATIONAL BASIS OTHER THAN INTENT BY DEFENDANTS TO CAUSE BODILY, AND MENTAL TRAUMATIZING HARM, IN DIRECT VIOLATION OF THE U.S. CONST. 8TH AND 14TH AMENDMENT.

THE PLAINTIFF HAS NO PLAIN, ADEQUATE OR COMPLETE REMEDY AT LAW, TO REDRESS THE WRONGS STATED ON THE COMPLAINT. PLAINTIFF HAS BEEN AND STILL CONTINUES TO BE IRREPARABLY INJURED BY THE CONDUCT OF DEFENDANTS, UNLESS THE COURT GRANTS THE RELIEF WHICH PLAINTIFF SEEKS.

"REQUEST FOR RELIEF"

WHEREFORE, PLAINTIFF RESPECTFULLY REQUEST FOR THE COURT TO GRANT THE FOLLOWING RELIEF:

(A). APPOINT COUNSEL TO REPRESENT THIS PLAINTIFF, IN ORDER TO PROTECT THIS PLAINTIFF'S INTEREST IN THIS LITIGATION.

(B). PLAINTIFF SEEKS COMPENSATORY DAMAGES FROM EACH INDIVIDUAL DEFENDANT IN THE AMOUNT OF \$250,000

(C). PLAINTIFF SEEKS PUNITIVE DAMAGES FROM EACH INDIVIDUAL DEFENDANT IN THE AMOUNT OF \$250,000



(D) PLAINTIFF SEEKS PREVAILING PARTY FEES, IN THE AMOUNT RECOMMENDED BY THE DECIDING JUDGE, IF ATTORNEY REPRESENTATION IS GRANTED. 42 U.S.C. § 1988.

(E) PLAINTIFF SEEKS REDRESS FOR INJURIES RESULTING FROM DELIBERATE INDIFFERENCE TOWARDS PLAINTIFF'S CONSTITUTIONAL RIGHTS, THAT WAS VIOLATED IN BAD FAITH, WITH RECKLESS DISREGARD, FACTUAL MALICE, FAILURE TO ENFORCE ESTABLISHED COOR POLICY, AND THE U.S. CONST. 8TH AND 14TH AMENDMENTS.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 7/1/24  
DATE

SIGNATURE OF PLAINTIFF

(Name and title of paralegal, legal assistant, or other person who helped prepare this complaint)

(Signature of attorney, if any)

(Attorney's address & telephone number)

#### ADDITIONAL PAGES

All questions must be answered concisely in the proper space on the form. If you need more space you may attach more pages, but you are strongly encouraged to limit your complaint to twenty-five pages. If you attach additional pages, be sure to identify which section of the complaint is being continued and number all pages. Remember, there is no need to attach exhibits to your complaint.

**PROOF OF SERVICE BY MAIL**

**BY PERSON IN STATE CUSTODY**

(Fed. R. Civ. P. 5; 28 U.S.C. § 1746)

I, ARNIE GARCIA, declare:

I am over 18 years of age and a party to this action. I am a resident of KERN VALLEY  
STATE PRISON Prison,  
in the county of KERN VALLEY,  
State of California. My prison address is: PO BOX 5101

On \_\_\_\_\_,  
(DATE)

I served the attached: \_\_\_\_\_

(DESCRIBE DOCUMENT)

on the parties herein by placing true and correct copies thereof, enclosed in a sealed envelope, with postage thereon fully paid, in the United States Mail in a deposit box so provided at the above-named correctional institution in which I am presently confined. The envelope was addressed as follows:

I declare under penalty of perjury under the laws of the United States of America that the foregoing is true and correct.

Executed on \_\_\_\_\_  
(DATE) (DECLARANT'S SIGNATURE)